

## Field Training Officer Program Follow-up Training Report

To: Chief Administrator of Training or designee Facility Name: \_\_\_\_\_  
From: Transitional Development Specialist Trainee: \_\_\_\_\_  
Date: \_\_\_\_\_

The following is an interactive evaluation with the above named correctional officer two weeks after the completion of the eighty hour on-the-job training.

1. Skills that the trainee has learned through their training period that are helping them succeed in this job?

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2. Questions or concerns the trainee would like to have addressed?

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3. How the trainee feels they are doing in their new role as a correctional officer?

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4. Area of improvement that we need to address together?

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5. Plan of action to address areas of improvement listed above.

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### Signatures:

Correctional Training Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Transitional Development Specialist: \_\_\_\_\_ Date: \_\_\_\_\_

Assigned FTO (Pre/Post -Academy): \_\_\_\_\_ Date: \_\_\_\_\_

Trainee: \_\_\_\_\_ Date: \_\_\_\_\_